PARK MANOR HEALTH CARE CENTER

1824 EAST PARK PLACE

MILWAUKEE	53211	Phone: (414) 961-1115		Ownership:	Corporation
Operated from 1	./1 To 12/31	Days of Operation:	365	Highest Level License:	Skilled
Operate in Conju	nction with D	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds S	Set Up and Sta	affed (12/31/03):	94	Title 18 (Medicare) Certified?	Yes
Total Licensed E	Red Capacity	(12/31/03):	104	Title 19 (Medicaid) Certified?	Yes
Number of Reside	ents on 12/31.	/03:	83	Average Daily Census:	88

Services Provided to Non-Residents		Age, Gender, and Primary Di	2/31/03)	Length of Stay (12/31/03)			
Home Health Care	No	 Primary Diagnosis 					12.0 69.9
Supp. Home Care-Personal Care Supp. Home Care-Household Services	No No	Developmental Disabilities		 Under 65			4.8
Day Services	No	·		65 - 74	18.1	•	
Respite Care	No	Mental Illness (Other)	18.1	75 - 84	26.5		86.7
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	26.5	* * * * * * * * * * * * * * * * * * *	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.2	95 & Over	7.2	Full-Time Equivalent	
Congregate Meals No		Cancer 2.4 Nurs:		Nursing Staff per 100 Res	sing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	4.8		100.0	(12/31/03)	
Other Meals	No	Cardiovascular	16.9	65 & Over	78.3		
Transportation	No	Cerebrovascular	13.3			RNs	9.0
Referral Service	No	Diabetes	3.6	Gender	용	LPNs	12.9
Other Services	No	Respiratory	4.8			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	1.2	Male	39.8	Aides, & Orderlies	45.4
Mentally Ill	Yes			Female	60.2		
Provide Day Programming for			100.0				
Developmentally Disabled	Yes				100.0		
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Method of Reimbursement

		Medicare			edicaid itle 19			Other			Private Pay			Family Care			Managed Care	l 		
Level of Care	No.	90	Per Diem (\$)	No.	οlo	Per Diem (\$)	No.	olo Olo	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	%	Per Diem (\$)	No.	olo	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	10	18.5	146	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	10	12.0
Skilled Care	9	100.0	324	28	51.9	125	5	100.0	125	4	100.0	177	9	100.0	125	2	100.0	270	57	68.7
Intermediate				5	9.3	104	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	5	6.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				11	20.4	185	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	11	13.3
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	9	100.0		54	100.0		5	100.0		4	100.0		9	100.0		2	100.0		83	100.0

Admissions, Discharges, and		Percent Distributior	n of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/03
Deaths During Reporting Period							
			_		% Needing		Total
Percent Admissions from:		Activities of	8		sistance of	-	Number of
Private Home/No Home Health			-	One	Or Two Staff	· · · ·	Residents
Private Home/With Home Health	10.4	Bathing	9.6		63.9	26.5	83
Other Nursing Homes	9.0	Dressing	22.9		51.8	25.3	83
Acute Care Hospitals	74.6	Transferring	28.9		44.6	26.5	83
Psych. HospMR/DD Facilities	1.5		22.9		50.6	26.5	83
Rehabilitation Hospitals	1.5	Eating	28.9		41.0	30.1	83
Other Locations	0.0	******	******	****	******	******	*****
Total Number of Admissions	67	Continence		용	Special Treatmen	ts	용
Percent Discharges To:		Indwelling Or Extern	nal Catheter	7.2	Receiving Resp	iratory Care	6.0
Private Home/No Home Health	33.8	Occ/Freq. Incontiner	nt of Bladder	65.1	Receiving Trac	neostomy Care	2.4
Private Home/With Home Health	0.0	Occ/Freq. Incontiner	nt of Bowel	33.7	Receiving Suct	ioning	2.4
Other Nursing Homes	7.0	<u> </u>			Receiving Osto	my Care	2.4
Acute Care Hospitals	11.3	Mobility			Receiving Tube	Feeding	12.0
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	1.2	3	anically Altered Diets	41.0
Rehabilitation Hospitals	0.0	. <u> </u>			3	-	
Other Locations	4.2	Skin Care			Other Resident C	naracteristics	
Deaths	43.7	With Pressure Sores		4.8	Have Advance D	irectives	94.0
Total Number of Discharges		With Rashes		0.0			
(Including Deaths)	71				Receiving Psyc	noactive Drugs	63.9

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility	Pro	Ownership: Proprietary Peer Group		l Size:)-199 Group	Ski	ensure: lled Group	Al. Faci	l lities
	엉	%	Ratio	90	Ratio	%	Ratio	8	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	84.6	84.7	1.00	87.0	0.97	86.6	0.98	87.4	0.97
Current Residents from In-County	97.6	81.8	1.19	86.4	1.13	84.5	1.16	76.7	1.27
Admissions from In-County, Still Residing	29.9	17.7	1.69	18.9	1.58	20.3	1.47	19.6	1.52
Admissions/Average Daily Census	76.1	178.7	0.43	166.7	0.46	157.3	0.48	141.3	0.54
Discharges/Average Daily Census	80.7	180.9	0.45	170.6	0.47	159.9	0.50	142.5	0.57
Discharges To Private Residence/Average Daily Census	27.3	74.3	0.37	69.1	0.39	60.3	0.45	61.6	0.44
Residents Receiving Skilled Care	80.7	93.6	0.86	94.6	0.85	93.5	0.86	88.1	0.92
Residents Aged 65 and Older	78.3	84.8	0.92	91.3	0.86	90.8	0.86	87.8	0.89
Title 19 (Medicaid) Funded Residents	65.1	64.1	1.01	58.7	1.11	58.2	1.12	65.9	0.99
Private Pay Funded Residents	4.8	13.4	0.36	22.4	0.21	23.4	0.21	21.0	0.23
Developmentally Disabled Residents	16.9	1.1	15.69	1.0	16.55	0.8	19.96	6.5	2.60
Mentally Ill Residents	34.9	32.2	1.09	34.3	1.02	33.5	1.04	33.6	1.04
General Medical Service Residents	1.2	20.8	0.06	21.0	0.06	21.4	0.06	20.6	0.06
Impaired ADL (Mean)	52.5	51.8	1.01	53.1	0.99	51.8	1.01	49.4	1.06
Psychological Problems	63.9	59.4	1.08	60.0	1.06	60.6	1.05	57.4	1.11
Nursing Care Required (Mean)	8.9	7.4	1.20	7.2	1.24	7.3	1.22	7.3	1.21